COMBINED DECLAR APPLICATION WITH () Declaration submitted with initial	H POWER (ATTORNEY'S DOCKET PB60428USW First Names Inventor: Figure 1 John HOKE Complete if known: App No.:		
() Declaration submitted after initial	l filing (surcharge r	equired 37CFR1.16(e))		Filing Date		
			Group Art Unit:			
As below name	d inventor. I here	eby declare that:				
My residence, post office address and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
		NOVEL COMPO	SITION			
the specification of which	the specification of which (check only one item below):					
[]is attached hereto. OR [X] was filed on <u>06 August 2004</u> as United States application Serial No or PCT International						
Application Number PCT/EP2004/008843 filed and was amended on (MM/DD/YYYY)(if applicable)						
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to	o disclose inform	ation which is material t	o patentability as defined in 37 C	FR §1.56.		
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation	any PCT internated have also ident on all application learns	ional application which of iffed below, by checking naving a filing date before	designated at least one country of g the box, any foreign application re that of the application on which	her than the United for patent or inventor's		
PRIOR FOREIGN AND ANY I		Country	Foreign Filing Date	PRIORITY		
Number (s)			(MM/DD/YYYY))			
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5.						
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:						
Application No. Filing Date (MM/DD/YYYY)						
1. 60/493,388		08/07/2003				

DECLARATION FOR "371" APPLICATION

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY

TTORNEY'S DOCKET NUMBER

PB60428

Continued

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR	U.S. PARENT	APPLICATION or PCT PARENT	PPLICATION	ī				
					STATUS (Check one)			
U.S. Parent Application or PCT Parent			Parent Filing Date		PENDING	ABANDONED		
Number		(MM/DD/YY	Y Y)					
POWEI	D OF ATTORNEY	Y: As a named inventor, I hereby appoint	the prestitioners s	aggeriated with the	Customer Number	a provided below to		
		nd to transact all business in the Patent an				s provided below to		
		nd Customer Number 20462	a machara om	ice commerced area	CWIGI			
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						70 5012		
I hereby	declare that all s	statements made herein of my own kno	owledge are true	and that all stat				
		rue; and further that these statements						
		ble by fine or imprisonment, or both,						
		the application or any patent issuing						
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	E (1.0)	SECOND GIVEN NAME	INITIALIE		
2	OF INVENTOR	HOKE /	Frank Joh		John Franc			
	INVENTOR'S SIGNATURE	Signature Surfacion of the			Date: Ars 25- 2004			
0	RESIDENCE & CITIZENSHIP	Durham	STATE OR FOREIGN NC, US	COUNTRY	COUNTRY OF CITIZENS	ВНІР		
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COL	UNTRY		
1	ADDRESS	GlaxoSmithKline Corporate	King of Pruss	ia	Pennsylvania 19	406-0939, US		
		Intellectual Property – UW2220,	_		_			
		P O Box 1539						
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME	INITIAL		
2	OF INVENTOR INVENTOR'S	MARTINI Signature	Luigi		Date:			
	SIGNATURE	The state of the s						
0	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY		НІР		
	CITIZENSHIP POST OFFICE	Harlow POST OFFICE ADDRESS	Essex, GB		STATE & ZIP CODE/COL	INTRV		
2	ADDRESS	GlaxoSmithKline Corporate	King of Pruss	ia	Pennsylvania 19			
		Intellectual Property - UW2220,				, , ,		
		P O Box 1539						
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME/	INITIAL		
2	OF INVENTOR	RE Signature	Vincenzo		Date			
1	INVENTOR'S SIGNATURE	Signature			Date			
0	RESIDENCE &	CITY	STATE OR FOREIGN	COUNTRY	COUNTRY OF CITIZENS	HIP		
- 1	CITIZENSHIP	Harlow	Essex, GB		GB			
3	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Corporate	King of Pruss		Pennsylvania 19			
, i	ADDRESS	Intellectual Property – UW2220,	King of Fruss	la l	r emisylvania 13	400-0939, US		
		P O Box 1539						
+	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	:	SECOND GIVEN NAME/	INITIAL		
2	OF INVENTOR	SALE	Mark		Edward			
Ì	INVENTOR'S SIGNATURE	Signature Felleved			COUNTRY OF CITIZENS	2004		
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Į	CITIZENSHIP	Durham	NC, US		US			
[POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COU			
4	ADDRESS	GlaxoSmithKline Corporate	King of Pruss	ıa	Pennsylvania 19	400-0939, US		
		Intellectual Property – UW2220,		J				
		P O Box 1539						

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT					ATTORNEY'S DOCKET PB60428USw	
APPLICATION WITH	POWER	OF ATTORNEY	•	First Names I Frank John H		
				Complete		
				App No.:	er mitomit	
() Declaration submitted with initial fi	ling or					
() Declaration submitted after initial f	filing (surcharge	e required 37CFR1.16(e))		Filing Dat	е	
				Group Art	Unit:	
As below named i	nventor. I her	eby declare that:				
My residence, post office a	ddress and citi	izenship are as stated belo	ow next to my name.			
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
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the specification of which (check only one item below):						
[]is attached hereto. OR						
[X] was filed on 06 Augu	st 2004 as Un	ited States application So	erial No or PCT	International	L	
Application Number PCT/EP2004/008843 filed and was amended on (MM/DD/YYYY) (if applicable)						
I hereby state that I have re as amended by any amendr			the above-identified specification	m, including	the claims,	
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.						
I hereby claim foreign priority benefinventor's certificate or 365(a) of an States of America, listed below and inventor's certificate or of any PCT claimed:	y PCT interna have also iden international a	tional application which tified below, by checking application having a filin	designated at least one country of the box, any foreign application g date before that of the applicat	other than the n for patent o	e United or	
PRIOR FOREIGN AND ANY PR						
Number (s)	Prior Foreign Application Country Number (s)		Foreign Filing Date (MM/DD/YYYY))		RIORITY LAIMED	
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I hereby claim the benefit under Titl below:	le 35, United S	States Code §119(e) of an	y United States provisional app	olication(s) li	sted	
Application No.		Filing Date	(MM/DD/YYYY)			
1. 60/493,388		08/07/2003				
2.						
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DECLARATION FOR "371" APPLICATION

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY

GlaxoSmithKline Corporate

Durham
POST OFFICE ADDRESS
GlaxoSmithKline Corporate

Intellectual Property - UW2220,

P O Box 1539 FAMILY NAME

P O Box 1539

SALE

CITY

Intellectual Property - UW2220,

ATTORNEY'S DOCKET NUMBER

Pennsylvania 19406-0939, US

US STATE & ZIP CODE/COUNTRY Pennsylvania 19406-0939, US

SECOND GIVEN NAME/INITIAL

COUNTRY OF CITIZENSHIP

Edward

PB60428

Continued

POST OFFICE ADDRESS

FULL NAME OF INVENTOR'S INVENTOR'S

SIGNATURE RESIDENCE & CITIZENSHIP

POST OFFICE ADDRESS

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I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international

	filing date of this app	plication:					
PRIOF	U.S. PARENT	APPLICATION or PCT PARENT A	APPLICATION				
			STATUS (Check one)				
U.S. Parent Application or PCT Parent Number		PCT Parent Parent Filing I (MM/DD/YY)			PENDING	ABANDONED	
POWE	R OF ATTORNEY	: As a named inventor, I hereby appoint	the practitioners associated	d with the	e Customer Numbers	provided below to	
prosecut	te this application a	nd to transact all business in the Patent an	d Trademark Office conne	cted ther	ewith	_	
Custome	er Number 23347 au	nd Customer Number 20462					
Addres	s all corresponder	ace and telephone calls to Customer N	umber 20462		Direct Telephone Call	s to:	
					Katherine SIEBURTH		
					610 270 5012		
I hereby	v declare that all s	statements made herein of my own known	owledge are true and tha	it all sta	tements made on it	oformation and	
		rue; and further that these statements					
		ble by fine or imprisonment, or both,					
		the application or any patent issuing		iid tildt	such while large s	internerits may	
Jeopard							
2	FULL NAME OF INVENTOR	FAMILY NAME HOKE	FIRST GIVEN NAME Frank		SECOND GIVEN NAME/I John	NITIAL	
2	INVENTOR'S	Signature	Frank		Date:		
	SIGNATURE				22.0.		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENS	НІР	
	CITIZENSHIP	Durham	NC, US		US		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Corporate	City		STATE & ZIP CODE/COUNTRY Pennsylvania 19406-0939, US		
1	ADDRESS		King of Prussia		Pennsylvania 19	406-0939, US	
		Intellectual Property – UW2220,					
	- FILL STATE	P O Box 1539 FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME/I		
2	FULL NAME OF INVENTOR	MARTINI	Luigi		SECOND GIVEN NAME/I	NITIAL	
		Luigi		Date: 1 1 0			
	SIGNATURE	Signature MINNONNE				reaf	
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	CITIZENSHIP POST OFFICE	Harlow POST OFFICE ADDRESS	Essex, GB		STATE & ZIP CODE/COU		
2	ADDRESS	GlaxoSmithKline Corporate	King of Prussia		Pennsylvania 19		
~	1 ED STEEDS	Intellectual Property – UW2220,	King of Frussia		1 chisyivania 13.	400-0239, 63	
	4	P O Box 1539		j			
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME/I	NITIAL.	
2	OF INVENTOR	RE 11	Vincenzo				
	INVENTOR'S	Stangtung			Date		
	SIGNATURE				11-04-		
0 RESIDENCE & CITY		Harlow	STATE OR FOREIGN COUNTRY ESSEX, GB		COUNTRY OF CITIZENSI GB	нг	
- 1	CITIZENSHIP POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COU	NTRY	

King of Prussia

FIRST GIVEN NAME

King of Prussia

STATE OR FOREIGN COUNTRY

Mark

NC, US